

2014 1st Quarter Report to the Lowell, Massachusetts Board of Health

Reporting Period: January 2014 through March 2014

INTRODUCTION:

This is the 2014 1st Quarter Report for the Lowell Board of Health.

We have gone back to a quarterly presentation because at the 2013 End of Year Presentation a request by the Board of Health for additional data regarding the utilization of Non-Trinity EMS units for emergency response was made.

As requested, we did look back at 2013 and found nine (9) occurrences where we utilized a Non-Trinity EMS unit for a 911 Emergency Response. In 2013 we responded to 12,687 911 emergencies. Therefore for 2013 we had a 0.071% of Non-Trinity EMS Unit utilization.

For the 1st Quarter of 2014, we had three (3) occurrences in which a Non-Trinity EMS Unit was utilized for a 911 Emergency Response. This yielded a 0.067% Non-Trinity EMS Unit utilization. All three utilizations were due to emergency request volume.

For reader clarification, we changed "Saints" to "LGH Paramedics" wherever "Saints" had been previously labeled.

We also left yearly totals where indicated for both 2012 & 2013.

Any questions, comments, or concerns surrounding the contents of this report should be directed to:

Trinity EMS, Inc.

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Thank You,

Management Team Trinity EMS, Inc.

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TRINITY EMS, INC.

LOWELL MASSACHUSETTS EMS PERFORMANCE INDICATORS

REPORTING TIME PERIOD: 1ST QUARTER 2014

City of Lowell: Population: Approx. 106,500 Geographic Size: 14.5 Sq. miles

911 OPERATIONAL PERFORMANCE – DATA

TIMES:

	FIRST QUART	er – Performance S	CORE = 96.24%	SECO	SECOND QUARTER – PERFORM SCORE =		
	Trinity EMS	Trinity ALS	LGH Paramedics	Trinity EMS	Trinity ALS	LGH Paramedics	
Ave. Out of Chute	1 min. 1 sec.	1 min. 6 sec.	59 sec.				
Ave. Response	4 min. 9 sec.	4 min. 18 sec.	5 min. 15 sec.				
Ave. On Scene	12 min. 13 sec.	9 min. 36 sec.	16 min. 23 sec.				
Ave. Transport	4 min. 37 sec.	4 min. 2 sec.	4 min. 37 sec.				
# of events greater than 7 min. 59 sec. response times:			180				
# of events using NON-Trinity EMS Units:			3				

TIMES CONTINUED:

	THIRD	QUARTER – PERFORM	1 Score =	Four	TH QUARTER – PERFO	RM SCORE =
	Trinity EMS	Trinity ALS	LGH Paramedics	Trinity EMS	Trinity ALS	LGH Paramedics
Ave. Out of Chute						
Ave. Response						
Ave. On Scene						
Ave. Transport						
# of events greater than 7 min. 59 sec. response times:						
# of events using NO	ON-Trinity EMS Ur	nits:				

VOLUME:

	2012 YEARLY TOTAL	2013 YEARLY TOTAL	1 ST QUARTER 2014	2 ND QUARTER 2014	3 RD QUARTER 2014	4 [™] Quarter 2014
TOTAL RESPONSES						
(BLS & ALS)	18032	18538	4784			
TOTAL ALS RESPONSES	6440 / 35.71%	6740 / 36.36%	1793 / 37.48%			
TRINITY ALS RESPONSES	629 / 9.77%	621 / 9.21%	159 / 8.87%			
LGH PARAMEDICS						
RESPONSES	5811 / 90.23%	6119 / 90.79%	1634 / 91.13%			

TRANSPORTS:

	2012 YEARLY TOTAL	2013 YEARLY TOTAL	1 st Quarter 2014	2 ND QUARTER 2014	3 RD QUARTER 2014	4 [™] Quarter 2014
TOTAL TRANSPORTS (BLS & ALS)	12016	12687	3309			
TOTAL BLS TRANSPORTS	8994 / 74.85%	9838 / 77.54%	2580 / 77.97%			
TOTAL ALS TRANSPORTS	3022 / 25.15%	2849 / 22.46%	729 / 22.03%			
TRINITY ALS TRANSPORTS	386 / 12.77%	326 / 11.44%	73 / 10.01%			
LGH PARAMEDICS TRANSPORTS	2630 / 87.03%	2523 / 88.56%	656 / 89.99%			
Unable to Intercept	31 / 0.34%	34 / 0.35%	6 / 0.23%			
**	4450 /05 000/	4474 / 00 700/	270 / 26 050/			
**TOTAL TRIAGED DOWN	1152 /25.66%	1154 / 20.53%	378 / 26.85%			
**TRINITY ALS TRIAGED DOWN	29 / 6.67 %	43 / 8.08%	10 / 8.34%			
	Denom = 435	Denom = 531	Denom = 120	Denom =	Denom =	Denom =
**LGH Paramedics	1123 / 27.70%	1111 / 21.82%	368 / 28.57%			
Triaged Down	Denom = 4054	Denom = 5091	Denom = 1288	Denom =	Denom =	Denom =

^{** =} Denominator adjusted by removing cancelled calls

NO TRANSPORTS:

	2012 Y EARLY	2013 YEARLY	1 st Quarter 2014:	2 ND QUARTER 2014:	3 RD QUARTER 2014:	4 [™] Q UARTER 2014 :
REASONS	TOTAL: 6016	TOTAL: 5854	1475			
CANCELLED VIA ALS	214 / 3.56%	197 / 3.36%	44 / 2.98%			
CANCELLED VIA BLS	200 / 3.32%	266 / 3.86%	50 / 3.39%			
CANCELLED VIA CLOSER UNIT	157 / 2.61%	156 / 2.66%	47 / 3.19%			
CANCELLED VIA FAM/STAFF	51 / 0.85%	74 / 1.26%	8 / 0.54%			
CANCELLED VIA FIRE	539 / 8.96%	534 / 9.12%	136 / 9.22%			
CANCELLED VIA POLICE	1219 / 20.26%	1159 / 19.80%	231 / 15.66%			
NO EMS NEEDED	715 / 11.88%	644 / 11.00%	224 / 15.19%			
No Pt. Found	369 / 6.13%	337 / 5.76%	84 / 5.69%			
PT. DECEASED UPON ARRIVAL	75 / 1.25%	72 / 1.23%	27 / 1.83%			
REFUSAL	2433 / 40.44%	2440 / 41.68%	624 / 42.3%			
OTHER	44 / 0.73%	15 / 0.26%	0			

911 CLINICAL PERFORMANCE - DATA

PARAMEDICS:

		First	Quarter		Second Quarter				
Paramedics	Full Time	Part Time	Per Diem	Nat. Reg.	Tot. / Exp. Years	Full Time	Part Time	Per Diem	Nat. Reg.
Trinity – 56 with									
Ave. Years = 8.01	36	13	7	39 / 69.64%					
LGH Paramedics –	Not	Not	Not	Not					
Not Provided	Provided	Provided	Provided	Provided					

PARAMEDICS CONTINUED:

	Third Quarter				Fourth Quarter				
Paramedics	Full Time	Part Time	Per Diem	Nat. Reg.	Tot. / Exp. Years	Full Time	Part Time	Per Diem	Nat. Reg.
Trinity –									
LGH Paramedics –									

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1st QUARTER -

2nd QUARTER –

Trinity EMS

P-26 (2 Paramedics) 24 hr. a day / 7 days per week

LGH Paramedics

Trinity EMS

<u>LGH Paramedics</u> No Data for 1st Quarter Provided

3rd QUARTER -

4th QUARTER -

Trinity EMS

Trinity EMS

LGH Paramedics

LGH Paramedics

INTUBATIONS – 1st ATTEMPT:

	2012 Yearly Totals	2013 YEARLY	1 st Quarter 2014	2 ND QUARTER 2014	3 RD QUARTER 2014	4 TH QUARTER 2014
		TOTALS***				
*Trinity Total	67 / 91 = 73.63%	47 / 64 = 73.44%	9 / 12 = 75%			
Trinity Lowell 1 st						
Attempt	11 / 12 = 91.67%	3 / 4 = 75%	2 /2 = 100%			
Trinity Lowell						
total success rate	N/A	3 / 3 = 100%	2 / 2 = 100%			
Trinity *MAI in						
Lowell	0	0	0			
LGH Paramedics						
Total	Unavailable	Unavailable	Not Provided			
LGH Paramedics						
Lowell 1 st	123 / 143 = 86.01%	Unavailable	30 / 37 = 81.08%			
Attempt						
LGH Paramedics						
Lowell total	N/A	Unavailable	36 / 37 = 97.30%			
success rate						
LGH Paramedics						
**MAI in Lowell	60	Unavailable	14			

IO SUCCESS RATES:

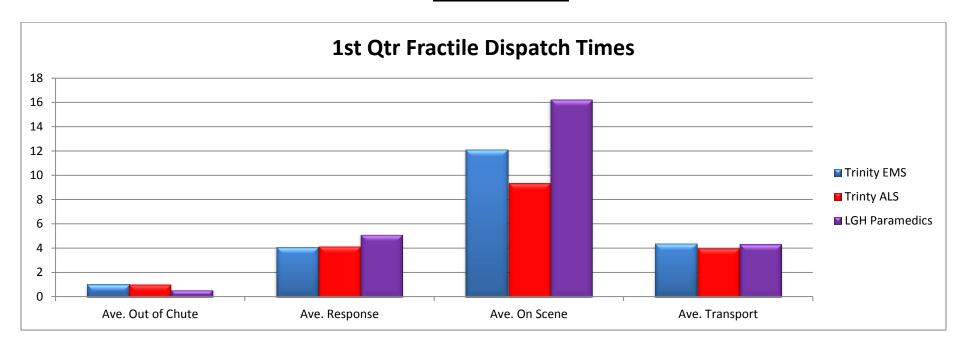
	2012 Yearly	2013 YEARLY	1 ST QUARTER 2014	2 ND QUARTER 2014	3 RD QUARTER 2014	4 TH QUARTER 2014
	Totals***	TOTALS***				
Trinity Total	48 / 49 = 97.96%	44 / 47 = 93.62%	11 / 11 = 100%			
Trinity Lowell	7 / 7 = 100%	2 / 2 = 100%	3 / 3 = 100%			
LGH Paramedics						
Total	Unavailable	Unavailable	Not Provided			
LGH Paramedics						
Lowell	30 / 32 = 93.75%	Unavailable	19 / 19 = 100%			

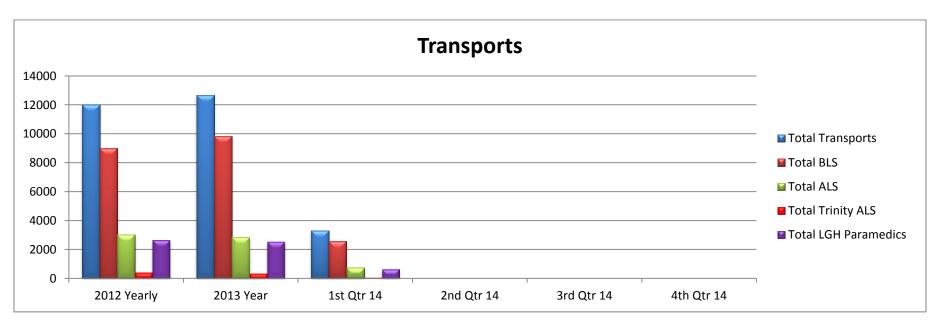
^{*}INTUBATION TOTAL – Total patients intubated / Total Patients Intubation attempted.

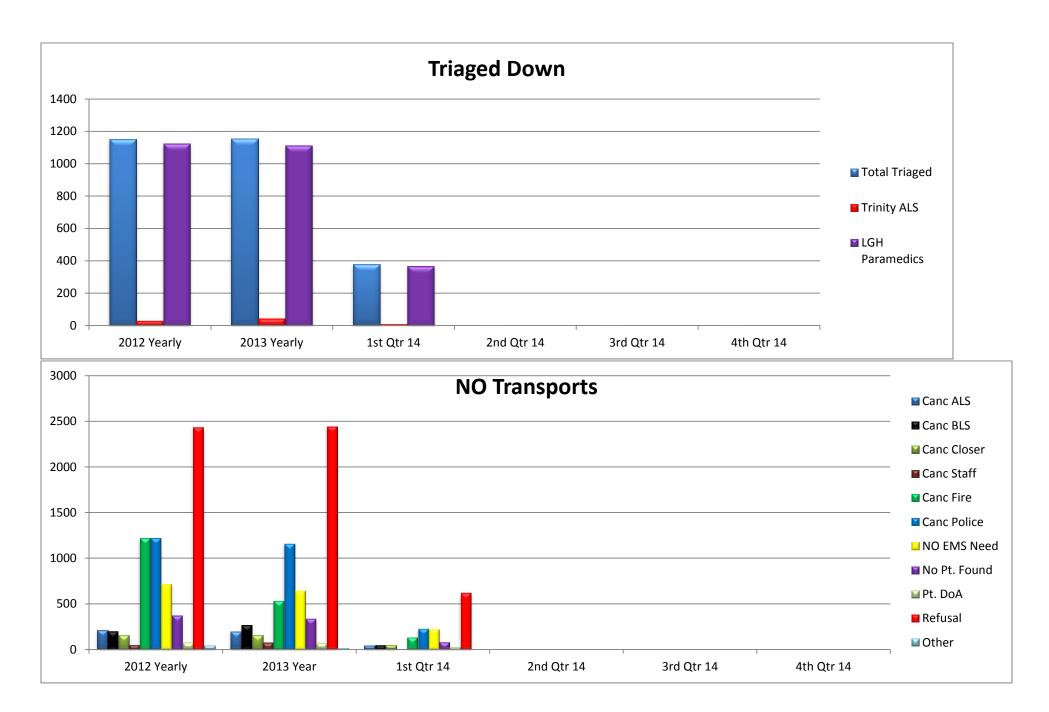
^{**}MAI – Medication Assisted Intubation, in Massachusetts, this requires the use of a Paralytic which is controlled & monitored by a special project waiver that Trinity EMS, Inc. is not included in. See also <u>Glossary of Terms</u>.

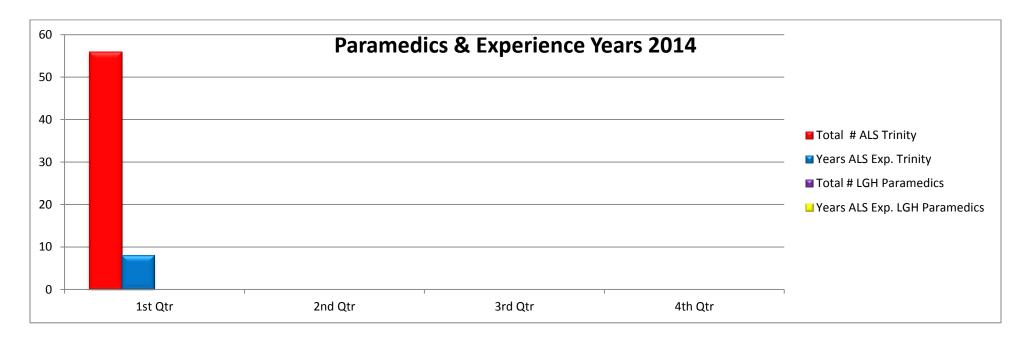
^{***} Because Quarterly Data was <u>NOT</u> provided, Yearly Data for that category is unavailable.

GRAPHICS – CHARTS









GLOSSARY OF TERMS

Advanced Life Support – may refer to vehicles staffed with at least one paramedic or refer to a paramedic level of patient care. Trinity

Emergency ALS vehicles are staffed with two paramedics.

A Response: Is defined as dispatching or sending an ambulance to a request for service. In this report, a response is further sorted to include only

emergency responses. These numbers do NOT include routine transfers such as dialysis patients or radiation treatment patients.

<u>A Transport</u>: Is defined as taking a patient in an ambulance to a destination.

BLS: Basic Life Support – may refer to a vehicle staffed with at least one emergency medical technician (EMT) or an EMT level of patient care.

Trinity BLS Ambulances are staffed with two EMT's.

EMD: Emergency Medical Dispatch – a nationally recognized system whereby the Dispatchers are trained and follow a specific protocol to

ascertain the nature of illness/injury and provide patient care instructions to the caller until the First Responders or Ambulance arrives.

Intubation Attempt: Is defined as insertion of the laryngoscope blade into the oral cavity for the purpose of inserting an endotracheal tube

MAI: Medication Assisted Intubation is generally regarded as facilitating an intubation with the use of sedatives. In Massachusetts

however, this term includes the use of Paralytics. The Massachusetts MAI program is not part of the standard scope of

practice for a Paramedic. It is controlled through the Department of Public Health's Office of Emergency Medical Services' Medical

Services Committee utilizing a Special Project Waiver.

On Scene Time: The amount of time that has elapsed from the moment the ambulance is on scene to the moment that the ambulance beings

transporting OR is released back into service.

Out of Chute Time: The amount of time that elapses from the moment when the ambulance is dispatched to the moment the ambulance begins

moving towards the call.

On Time Performance Score: Is the percentage of calls that meet or exceed the response time criteria.

Request for Service: When a dispatcher receives request for an ambulance usually via telephone or radio.

Response Time: The amount of time that has elapsed from the moment the call is completely entered into the Dispatch system to the moment the

ambulance arrives on scene.

RSI: Rapid Sequence Intubation is the facilitation of intubation using both sedatives and paralytics.

Service Zone Plan: M.G.L. Part I Title XVI Chpt. 111C Section I defines as "a geographic area defined by and comprised of one or more local jurisdictions, in

which a local jurisdiction may select and the department shall designate an EMS first response service and an ambulance service to provide EMS first response and primary ambulance response to the public within that defined geographic area, pursuant to section 10."

In addition to Section 1 and Section 10 of the M.G.L. Part I Title XVI Chpt. 111C, Service Zones are further addressed through

Massachusetts Regulations 105 CMR 170.249.

Transport Time: The amount of time that has elapsed from the moment the ambulance leaves the scene with a patient to the moment the ambulance

arrives at the receiving facility.

Triage Down: When a paramedic unit arrives at patient side and based on the patient condition determines that the patient may be treated and

transported at the Basic Life Support (BLS) level. Note – there is no protocol for this practice, however, OEMS does address it through an

administrative advisory: A/R 5-620.

Triage Down

Formulation: The denominator reflects the number of times an ALS Unit gets on scene. Therefore, when an ALS unit is cancelled prior to arrival or

when the ALS unit is unable to intercept with the requesting BLS unit, those incidents are removed from the calculation.